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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

APPLICATION AS FILED – PART I

(Column 1) (Column 2)

SMALL ENTITY

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEE (\$)	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))						
SEARCH FEE (37 CFR 1.16(k), (l), or (m))						
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))						
TOTAL CLAIMS (37 CFR 1.16(i))	36 minus 20 =	* 16	X =		16 x 18 =	288.00
INDEPENDENT CLAIMS (37 CFR 1.16(h))	2 minus 3 =	* 3	X =			
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))			TOTAL		TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED – PART II

AMENDMENT A <i>09/30/06</i>	(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)
Total (37 CFR 1.16(l))	* 36	Minus	** 36	= 0	X =	RATE (\$)
Independent (37 CFR 1.16(h))	* 2	Minus	*** 3	= 0	X =	ADDITIONAL FEE (\$)
Application Size Fee (37 CFR 1.16(s))						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					TOTAL ADD'L FEE	TOTAL ADD'L FEE
AMENDMENT B	(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)
Total (37 CFR 1.16(l))	*	Minus	**	=	X =	RATE (\$)
Independent (37 CFR 1.16(h))	*	Minus	***	=	X =	ADDITIONAL FEE (\$)
Application Size Fee (37 CFR 1.16(s))						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					TOTAL ADD'L FEE	TOTAL ADD'L FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

FEE TRANSMITTAL

Electronic Version v08
Stylesheet Version v08.0

Title of Invention	SYSTEM AND METHOD FOR VISUALIZING DATA IN A THREE-DIMENSIONAL SCENE																					
<p>Application Number: Date: First Named Applicant: SIMON G. FLEURY Attorney Docket Number: 19.0343</p>																						
TOTAL FEE AUTHORIZED \$1038																						
Patent fees are subject to annual revisions on or about October 1st of each year.																						
Filing as large entity																						
BASIC FILING FEE																						
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>750</td><td>750</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fee: \$750</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	1001	750	750	Subtotal For Basic Filing Fee: \$750										
Fee Description	Fee Code	Amount \$	Fee Paid \$																			
Utility Filing Fee	1001	750	750																			
Subtotal For Basic Filing Fee: \$750																						
EXTRA CLAIM FEES																						
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claims</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims: 36</td><td>16</td><td>1202</td><td>18</td><td>288</td></tr><tr><td>Independent Claims: 2</td><td>0</td><td>1201</td><td>84</td><td>0</td></tr><tr><td colspan="4">Subtotal For Extra Claims Fees: \$ 288</td></tr></tbody></table>				Fee Description	Extra Claims	Fee Code	Amount \$	Fee Paid \$	Total Claims: 36	16	1202	18	288	Independent Claims: 2	0	1201	84	0	Subtotal For Extra Claims Fees: \$ 288			
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Total Claims: 36	16	1202	18	288																		
Independent Claims: 2	0	1201	84	0																		
Subtotal For Extra Claims Fees: \$ 288																						
AUTHORIZED BILLING INFORMATION																						
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:																						
Deposit account number: 190610																						
Access Code ****																						
Deposit name: SCHLUMBERGER OILFIELD SERVICES																						
Deposit authorized name: BRIGITTE L. JEFFERY																						